

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

Application or Pocet Number
107525309

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
U.S. NATIONAL STAGE FEES		
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT. = \$ 300
EXAMINATION FEE	Subless PCT Article 33(1)- (4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200
SEARCH FEE	U.S. & USA = \$ 50 / \$ 100 All other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500
FEES FOR EXTRA SPEC. POS.	minus 100 =	/ 50 =
TOTAL CHARGEABLE CLAIMS	4 minus 20 =	—
INDEPENDENT CLAIMS	1 minus 3 =	—
MULTIPLE DEPENDENT CLAIM PRESENT	—	<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	Fee
BASIC FEE	<input type="checkbox"/>
EXAM. FEE	<input type="checkbox"/>
SEARCH FEE	<input type="checkbox"/>
X \$ 125 =	<input type="checkbox"/>
X \$ 25 =	<input type="checkbox"/>
X \$ 100 =	<input type="checkbox"/>
+ \$ 180 =	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>
OR	OR
RATE	Fee
BASIC FEE	300
EXAM. FEE	200
SEARCH FEE	400
X \$ 250 =	<input type="checkbox"/>
X \$ 50 =	<input type="checkbox"/>
X \$ 200 =	<input type="checkbox"/>
+ \$ 360 =	<input type="checkbox"/>
TOTAL	900

CLAIMS AS AMENDED - PART II

	2-23-05	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	4	Minus	** 20	—
Independent	1	Minus	*** 3	—
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
X \$ 25 =	<input type="checkbox"/>
X \$ 100 =	<input type="checkbox"/>
+ \$ 180 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR
RATE	ADDITIONAL FEE
X \$ 50 =	<input type="checkbox"/>
X \$ 200 =	<input type="checkbox"/>
+ \$ 360 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	—	Minus	** —
Independent	—	Minus	*** —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
X \$ 25 =	<input type="checkbox"/>
X \$ 100 =	<input type="checkbox"/>
+ \$ 180 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>
OR	OR
RATE	ADDITIONAL FEE
X \$ 50 =	<input type="checkbox"/>
X \$ 200 =	<input type="checkbox"/>
+ \$ 360 =	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.